FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

RECD S.E.O.

OCT 2 7 2006

FORM D

100 UNIFORM LIMITED OFFERING EXEMPTION

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR

OMB APPROVAL			
OMB Number:	3235-0076		
Expires:			
Estimated average	e burden		

hours per response.....16.00

SEC USE ONLY							
Prefix		Serial					
DATÉ RECEIVED							
	1						

1000				
Name of Offering (check if this is an ar	mendment and name has changed, and in	dicate change.)		
Membership Interests				
Filing Under (Check box(es) that apply):	🔲 Rule 504 🔲 Rule 505 📝 Rule 50	06 Section 4(6)	ULOE	1 (PRO) SELLE BILLI BONG BUSI LIGHT URLI BONG SOLICE
Type of Filing: New Filing Amer	ndment			:
),48% (0),8 0)), 39% 8% (1), 101, 101, 34% 18% (1)
	A. BASIC IDENTIFICAT	ION DATA		
1. Enter the information requested about th	e issuer			06061209
Name of Issuer (check if this is an amen	idment and name has changed, and indic	ate change.)		
POP FUNDING, LLC				
Address of Executive Offices	(Number and Street, City	, State, Zip Code)	Telephone Nu	mber (Including Area Code)
841 Bishop Street, Suite 1700	Honolulu, Hawaii 96	813	(808) 531-3	000
Address of Principal Business Operations	(Number and Street, Cit		Telephone Nu	imber (Including Area Code)
(if different from Executive Offices)				
D. (D.)		<u> </u>		
Brief Description of Business				PHUCESSEL
Real Estate interests				0.0 0000
		<u></u>		<u>₩ЭV 0 0 2008</u>
Type of Business Organization	limited partnership, already formed	other (pl	agen ennoify):	*****
business trust	limited partnership, to be formed	other (pr	lir	nited liability companyOMSON
	<u> </u>			FINANCIAL
Actual or Estimated Date of Incorporation or	Month Year	Antual Desim	ntad	
Jurisdiction of Incorporation or Organization:		Actual ☐ Estim		
surfacement of meorporation of Organization.	CN for Canada; FN for other foreign		DE	
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GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

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A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer General and/or Director Managing Partner JHS Manager, LLC Full Name (Last name first, if individual) 841 Bishop Street, Suite 1700 Honolulu, Hawaii 96813 Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Check Box(es) that Apply: Director General and/or Managing Partner Shidler Hawaii Investment Partners, LLC Full Name (Last name first, if individual) 841 Bishop Street, Suite 1700 Honolulu, Hawaii 96813 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter General and/or Director Managing Partner Shidler Equities, L.P. Full Name (Last name first, if individual) 841 Bishop Street, Suite 1700 Honolulu, Hawaii 96813 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Director General and/or Managing Partner Reynolds Partners Full Name (Last name first, if individual) 10188 Telesis Court, Suite 222 San Diego, California 92121 Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Check Box(es) that Apply: ☐ Beneficial Owner Director General and/or Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Beneficial Owner Executive Officer Promoter General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

					В. Г	NFORMAT	ION ABOU	T OFFERI	NG				
1.	Has the	issuer sol	d, or does t	he issuer i	ntend to se	ll, to non-a	ccredited i	nvestors in	n this offer	ing?		Yes [No E
	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							<u> </u>	<u> </u>				
2.	What is	the minin	num investr	nent that w	vill be acce	pted from	any individ	lual?		,		\$	\
,	Da sa da	o o Cranina		4 accompands	:	.1						Yes	No
3. 4.											irectly, any	K	
	commis If a pers or state a broke	ssion or sim son to be lis s, list the n r or dealer	nilar remune sted is an as ame of the b , you may s	eration for sociated per proker or diset forth th	solicitation erson or age ealer. If me	of purchas ent of a brok ore than fiv	ers in conne ker or deale c (5) person	ection with r registered as to be list	sales of se d with the S ed are asso	curities in t SEC and/or	he offering. with a state sons of such		
Ful	l Name (Last name	first, if ind	ividual)									
Bus	iness or	Residence	Address (N	lumber and	d Street, C	ity, State, 2	(ip Code)		<u> </u>				
Nan	ne of As	sociated B	roker or De	aler				<u>.</u> .			<u></u>	,	
Stat	es in Wh	nich Persor	ı Listed Ha	s Solicited	or Intends	to Solicit	Purchasers				<u></u>		
	(Check	"All State:	s" or check	individual	l States)								States
	AL	AK	AZ	AR	CA	CO	[CT]	[DE]	DC	FL	GA	П	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT]	NE SC	NV SD	NH	NJ	NM)	NY	NC	ND	OH	OK	OR	PA
	KI	SC	[20]	[TN]	TX	TU	VT	VA	WA	[WV]	WI	WY	PR
Fuli	l Name (Last name	first, if ind	ividual)		·							
Bus	iness or	Residence	Address (1	Number an	nd Street, C	City, State,	Zip Code)			· · · · · · · · · · · · · · · · · · ·	 		
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Nan	ne of As	sociated B	roker or De	aler									
Stat	es in Wi	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers					·	
	(Check	"All State:	s" or check	individual	l States)							☐ All	States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	II.	ĪN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Gull			first, if ind										
ı un	(Name (izast name	mst, n mg	ividuali									
Bus	iness or	Residence	Address (Number an	d Street, C	ity, State,	Zip Code)		•			-	
Nan	ne of As	sociated B	roker or De	aler									
Stat	es in Wh	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
			s" or check										States
	AL	ĀK	AZ	AR	CA	CO	CT	DE	DC)	FL	GA	HI	[ÎD]
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	\overline{WV}	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	(
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt	\$		\$
	Equity	\$		\$
	Common Preferred			<u> </u>
	Convertible Securities (including warrants)	\$		\$
	Partnership Interests			\$
	Other (Specify Membership Interests)		_	\$ 2,075,000
	Total		_	\$ 2,075,000
	Answer also in Appendix, Column 3, if filing under ULOE.		_	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	12	_	\$_2,075,000
	Non-accredited Investors			\$
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505		-	\$
	Regulation A		-	\$
	Rule 504			\$
	Total		-	\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees	[}	\$
	Printing and Engraving Costs			\$
	Legal Fees			\$
	Accounting Fees	_	_	\$
	Engineering Fees	F]	\$
	Sales Commissions (specify finders' fees separately)	_	- 7	\$
	Other Expenses (identify)	_	_	\$
	Total	_	_]	\$ 0.00

	C. OFFERING PRICE, NUMBER	OF INVEST	ORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Qu proceeds to the issuer."	estion 4.a. Thi	is difference is the "adjusted gross		\$2.075.000
5.	Indicate below the amount of the adjusted gross procee each of the purposes shown. If the amount for any p check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C	urpose is not e payments lis	known, furnish an estimate and ted must equal the adjusted gross		
				Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		[\$
	Purchase of real estate		[\$
	Purchase, rental or leasing and installation of machinand equipment	0.00	0	 \$	_
	Construction or leasing of plant buildings and facilit	ies 0.00)		
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets issuer pursuant to a merger)	or securities c	of another	\$	□\$
	Repayment of indebtedness				
	Working capital				
	Other (specify): funding proceeds to subsidiary				2 \$ 2,075,000
				\$	\$
	Column Totals			<u></u> \$_0.00	<u> 2,075,000</u>
	Total Payments Listed (column totals added)	/ \$ <u>2</u>	,075,000		
		D. FEDERA	L SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the un nature constitutes an undertaking by the issuer to furnis information furnished by the issuer to any non-accred	h to the U.S.	Securities and Exchange Commis	ssion, upon writt	ule 505, the following en request of its staff
lss	uer (Print or Type)	iglaure)	Date	
Р	OP FUNDING, LLC	12/1/V	T	10/20/	06
Na	inte of Signer (Titlit of Type)	itle o Signer	(Print or Type)	10/20/	
f	AURENCE J. TAFF	TRÉASURE	OF JHS MANAGER,	its Mana	4E (2_

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)